



## Answers to Your Questions About Sexual Orientation and Homosexuality

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- What Is Sexual Orientation?
  - What Causes a Person To Have a Particular Sexual Orientation?
  - Is Sexual Orientation a Choice?
  - Can Therapy Change Sexual Orientation?
  - What About So-Called "Conversion Therapies"?
  - Is Homosexuality a Mental Illness or Emotional Problem?
  - Can Lesbians, Gay Men, and Bisexuals Be Good Parents?
  - Why Do Some Gay Men, Lesbians and Bisexuals Tell People About Their Sexual Orientation?
  - Why Is the "Coming Out" Process Difficult for Some Gay, Lesbian and Bisexual People?
  - What Can Be Done to Overcome the Prejudice and Discrimination the Gay Men, Lesbians, and Bisexuals Experience?
  - Why is it Important for Society to be Better Educated About Homosexuality?
  - Are All Gay and Bisexual Men HIV Infected?
  - Where Can I Find More Information About Homosexuality?
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### What Is Sexual Orientation?

Sexual Orientation is an enduring emotional, romantic, sexual or affectional attraction to another person. It is easily distinguished from other components of sexuality including biological sex, gender identity (the psychological sense of being male or female) and the social gender role (adherence to cultural norms for feminine and masculine behavior). Sexual orientation exists along a continuum that ranges from exclusive homosexuality to exclusive heterosexuality and includes various forms of bisexuality. Bisexual persons can experience sexual, emotional and affectional attraction to both their own sex and the opposite sex. Persons with a homosexual orientation are sometimes referred to as gay (both men and women) or as lesbian (women only).

Sexual orientation is different from sexual behavior because it refers to feelings and self-concept. Persons may or may not express their sexual orientation in their behaviors.

### What Causes a Person To Have a Particular Sexual Orientation?

There are numerous theories about the origins of a person's sexual orientation; most scientists today agree that sexual orientation is most likely the result of a complex interaction of environmental, cognitive and biological factors. In most people, sexual orientation is shaped at an early age. There is also considerable recent evidence to suggest that biology, including genetic or inborn hormonal factors, play a significant role in a person's sexuality. In summary, it is important to recognize that there are probably many reasons for a person's sexual orientation and the reasons may be different for different people.

### Is Sexual Orientation a Choice?

No, human beings can not choose to be either gay or straight. Sexual orientation emerges for most people in early adolescence without any prior sexual experience. Although we can choose whether to act on our feelings, psychologists do not consider sexual orientation to be a conscious choice that can be voluntarily changed.

### Can Therapy Change Sexual Orientation?

No. Even though most homosexuals live successful, happy lives, some homosexual or bisexual people may seek to change their sexual orientation through therapy, sometimes pressured by the influence of family members or religious groups to try and do so. The reality is that homosexuality is not an illness. It does not require treatment and is not changeable. However, not all gay, lesbian, and bisexual people who seek assistance from a mental health professional want to change their sexual orientation. Gay, lesbian, and bisexual people may seek psychological help with the coming out process or for strategies to deal with prejudice, but most go into therapy for the same reasons and life issues that bring straight people to mental health professionals.

### What About So-Called "Conversion Therapies"?

Some therapists who undertake so-called conversion therapy report that they have been able to change their clients' sexual orientation from homosexual to heterosexual. Close scrutiny of these reports however show several factors that cast doubt on their claims. For example, many of the claims come from organizations with an ideological perspective which condemns

homosexuality. Furthermore, their claims are poorly documented. For example, treatment outcome is not followed and reported overtime as would be the standard to test the validity of any mental health intervention.

The American Psychological Association is concerned about such therapies and their potential harm to patients. In 1997, the Association's Council of Representatives passed a resolution reaffirming psychology's opposition to homophobia in treatment and spelling out a client's right to unbiased treatment and self-determination. Any person who enters into therapy to deal with issues of sexual orientation has a right to expect that such therapy would take place in a professionally neutral environment absent of any social bias.

### **Is Homosexuality a Mental Illness or Emotional Problem?**

No. Psychologists, psychiatrists and other mental health professionals agree that homosexuality is not an illness, mental disorder or an emotional problem. Over 35 years of objective, well-designed scientific research has shown that homosexuality, in and itself, is not associated with mental disorders or emotional or social problems. Homosexuality was once thought to be a mental illness because mental health professionals and society had biased information. In the past the studies of gay, lesbian and bisexual people involved only those in therapy, thus biasing the resulting conclusions. When researchers examined data about these people who were not in therapy, the idea that homosexuality was a mental illness was quickly found to be untrue. In 1973 the American Psychiatric Association confirmed the importance of the new, better designed research and removed homosexuality from the official manual that lists mental and emotional disorders. Two years later, the American Psychological Association passed a resolution supporting the removal. For more than 25 years, both associations have urged all mental health professionals to help dispel the stigma of mental illness that some people still associate with homosexual orientation.

### **Can Lesbians, Gay Men, and Bisexuals Be Good Parents?**

Yes. Studies comparing groups of children raised by homosexual and by heterosexual parents find no developmental differences between the two groups of children in four critical areas: their intelligence, psychological adjustment, social adjustment, and popularity with friends. It is also important to realize that a parent's sexual orientation does not dictate his or her children's. Another myth about homosexuality is the mistaken belief that gay men have more of a tendency than heterosexual men to sexually molest children. There is no evidence to suggest that homosexuals are more likely than heterosexuals to molest children.

### **Why Do Some Gay Men, Lesbians and Bisexuals Tell People About Their Sexual Orientation?**

Because sharing that aspect of themselves with others is important to their mental health. In fact, the process of identity development for lesbians, gay men and bisexuals called "coming out", has been found to be strongly related to psychological adjustment—the more positive the gay, lesbian, or bisexual identity, the better one's mental health and the higher one's self-esteem.

### **Why Is the "Coming Out" Process Difficult for Some Gay, Lesbian and Bisexual People?**

For some gay and bisexual people the coming out process is difficult, for others it is not. Often lesbian, gay and bisexual people feel afraid, different, and alone when they first realize that their sexual orientation is different from the community norm. This is particularly true for people becoming aware of their gay, lesbian, or bisexual orientation as a child or adolescent, which is not uncommon. And, depending on their families and where they live, they may have to struggle against prejudice and misinformation about homosexuality. Children and adolescents may be particularly vulnerable to the deleterious effects of bias and stereotypes. They may also fear being rejected by family, friends, co-workers, and religious institutions. Some gay people have to worry about losing their jobs or being harassed at school if their sexual orientation became well known. Unfortunately, gay, lesbian and bisexual people are at a higher risk for physical assault and violence than are heterosexuals. Studies done in California in the mid 1990s showed that nearly one-fifth of all lesbians who took part in the study and more than one-fourth of all gay men who participated had been the victim of a hate crime based on their sexual orientation. In another California study of approximately 500 young adults, half of all the young men participating in the study admitted to some form of anti-gay aggression from name-calling to physical violence.

### **What Can Be Done to Overcome the Prejudice and Discrimination the Gay Men, Lesbians, and Bisexuals Experience?**

Research has found that the people who have the most positive attitudes toward gay men, lesbians and bisexuals are those who say they know one or more gay, lesbian or bisexual person well—often as a friend or co-worker. For this reason, psychologists believe negative attitudes toward gay people as a group are prejudices that are not grounded in actual experiences but are based on stereotypes and prejudice. Furthermore, protection against violence and discrimination is very important, just as it is for other minority groups. Some states include violence against an individual on the basis of his or her sexual orientation as a "hate crime" and 10 U.S. states have laws against discrimination on the basis of sexual orientation.

### **Why is it Important for Society to be Better Educated About Homosexuality?**

Educating all people about sexual orientation and homosexuality is likely to diminish anti-gay prejudice. Accurate information about homosexuality is especially important to young people who are first discovering and seeking to understand their sexuality—whether homosexual, bisexual, or heterosexual. Fears that access to such information will make more people gay have no validity—information about homosexuality does not make someone gay or straight.

### **Are All Gay and Bisexual Men HIV Infected?**

No. This is a commonly held myth. In reality, the risk of exposure to HIV is related to a person's behavior, not their sexual orientation. What's important to remember about HIV/AIDS is it is a preventable disease through the use of safe sex practices and by not using drugs.

### **Where Can I Find More Information About Homosexuality?**

APA Lesbian, Gay, and Bisexual Concerns Program :750 First Street, NE. Washington, DC 20002

National Gay and Lesbian Task Force 2320 17th St. Washington, DC 20009 (202) 332-6483

Parents, Families and Friends of Lesbians and Gays 1726 M Street, NW, Suite 400, Washington, DC 20036  
(202) 467-8180

Sexuality Information and Education Council of the United States 130 W 42nd St., Ste. 350 New York, NY 10036  
(212)-819-9770